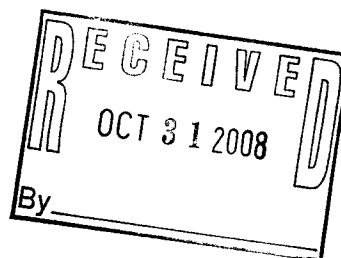


File with:
Iowa Ethics and Campaign
Disclosure Board
510 E. 12th, Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-4073

Reset Form



①

FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

COMMITTEE NAME (Must be same as on Statement of Organization)

Jack Drake for State Representative

IMPORTANT: Indicate by # type of committee you are reporting for: ☒

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

Jack Drake

Political Party (if applicable)

Republican

Office Sought

House of Representative

District (if Senate or House)

57

FORM

DR-2

(Rev. 07/2007)

DISCLOSURE
REPORT

For Office Use Only

Comm. #

727

Logged In

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Scanned

Computer

Audited

9 pages

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

Shirley J. Drake

SIGNATURE OF PERSON FILING REPORT

712-778-2538

TELEPHONE

10-28-08

DATE SIGNED

I AM FILING A October 28, 2008

(report date)

REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

Indicate by # ☒

☐ CHECK IF AMENDMENT TO REPORT DATED _____

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in
which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 13,065.07

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

4,282.00

Schedule F: Loans Received total (Attach Schedule F)

—

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

—

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL \$ 17,347.07

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

8,470.44

Schedule F: Loan Repayments total (Attach Schedule F)

—

CASH ON HAND at the end of this reporting period (if final report balance must be zero)

\$ 8,876.63

****UNPAID BILLS** (From Schedule D - Attach Schedule D)

\$

****IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E)

\$

1,177.50

****OUTSTANDING LOANS** (From Schedule F - Attach Schedule F)

\$

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES X NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

None

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN
(Including candidate's personal funds)

SCHEDULE
A
(Rev. 07/03)

MONETARY RECEIPTS

COMMITTEE NAME (Must be same as on Statement of Organization)
Jack Drake for State Representative

☐ CHECK THIS BOX IF AMENDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
10-15-08	ID# CK#	Julie Bulkeley 801 Joy Red Oak, IA. 51566		\$ 50.00	<input type="checkbox"/>
10-15-08	ID# CK#	Kathy Dirks 611-9th St. Harlan, IA. 51537		50.00	<input type="checkbox"/>
10-15-08	ID# CK#	Esther Loewenstein 804 Antigone City Dr Walnut, IA. 51577		25.00	<input type="checkbox"/>
10-15-08	ID# CK#	Wayne Krohn 1203 N. Willow St. Avoca, IA. 51521		50.00	<input type="checkbox"/>
10-16-08	ID# CK#	Stanley Zellmer 50053 Highland Rd. Atlantic, IA 50022		25.00	<input type="checkbox"/>
10-16-08	ID# CK#	Jack Ploeh 32480-490th St Avoca, IA. 51521		25.00	<input type="checkbox"/>
10-16-08	ID# CK#	Jim Tylet 1827 Bryn Mawr Ct. Atlantic, IA 50022		250.00	<input type="checkbox"/>
10-16-08	ID# CK#	Fern Lindvall 1703 E. 14th St. Apt. 23 Atlantic, IA. 50022		50.00	<input type="checkbox"/>
10-16-08	ID# CK#	Scott Deter P.O. Box 515 Atlantic, IA. 50022		100.00	<input type="checkbox"/>
10-17-08	ID# 6082 CK# 1386	Mid American Energy 666 Grand Ave. Des Moines, IA. 50303		200.00	<input type="checkbox"/>

SUB-TOTAL

\$ 825.00

TOTAL (if last page of this schedule)

\$

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Jack Drake for State Representative

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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10-17-08	ID# 6027 CK# 2764	Deere PAC Iowa 666 Grand Ave. Des Moines, IA. 50309		\$ 250.00	<input type="checkbox"/>
10-18-08	ID# 9751 CK# 1010	Iowa Quartet Horse Racing 3535 E. Court Ave. Des Moines, IA. 50317		250.00	<input type="checkbox"/>
10-18-08	ID# CK#	Kelly Wise P.O. Box 8 Atlantic, IA. 50022		100.00	<input type="checkbox"/>
10-18-08	ID# CK#	Harlan Gronewold P.O. Box 524 Atlantic, IA. 50022		25.00	<input type="checkbox"/>
10-18-08	ID# CK#	Charles Kineh 2409 Chestnut St. Apt. 17 Atlantic, IA. 50022		25.00	<input type="checkbox"/>
10-20-08	ID# CK#	Helen Krisinger P.O. Box 186 Griswold, IA. 51535		25.00	<input type="checkbox"/>
10-20-08	ID# CK#	Ann Cody 49198 Dogwood Rd. Griswold, IA. 51535		100.00	<input type="checkbox"/>
10-21-08	ID# CK#	Mark McNees 404 E. 21st St. Atlantic, IA. 50022		25.00	<input type="checkbox"/>
10-21-08	ID# CK#	Robert Camblin 903 Locust St. Atlantic, IA. 50022		50.00	<input type="checkbox"/>
10-21-08	ID# CK#	Don Steinbeck 69706 - 612th Griswold, IA. 51535		50.00	<input type="checkbox"/>
SUB-TOTAL				\$ 900.00	
TOTAL (if last page of this schedule)				\$	

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Page 2 of 5
(for Schedule A)

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For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Jack Drake for State Representative

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
10-21-08	ID# CK#	Michele Walker 1867-230th St. Red Oak, IA. 51566		\$ 25.00	<input type="checkbox"/>
10-21-08	ID# CK#	Mark Truesdell 5817 Waterbury Ct. Des Moines, IA. 50312		50.00	<input type="checkbox"/>
10-22-08	ID# CK#	Richard Smith 54393 Buck Creek Rd. Atlantic, IA. 50022		7.00	<input type="checkbox"/>
10-22-08	ID# CK#	Marla Maas 1455 Clark Ave West Liberty, IA. 52776		100.00	<input type="checkbox"/>
10-22-08	ID# CK#	Larry Unkrich 1305 Hill Top Ln. Fairfield, IA. 52556		100.00	<input type="checkbox"/>
10-22-08	ID# CK#	Heidi Vittetoe 2570 Hwy 92 Washington, IA. 52353		100.00	<input type="checkbox"/>
10-22-08	ID# CK#	Samuel Carney 1343-330th St Adair, IA. 50002		100.00	<input type="checkbox"/>
10-22-08	ID# CK#	Brooke Toole 1597-240th St. Independence, IA. 50644		100.00	<input type="checkbox"/>
10-22-08	ID# CK#	David Moody 58404-200th St. Nevada, IA. 50201		200.00	<input type="checkbox"/>
10-22-08	ID# CK#	Chat Brehneman 1551 Larch Ave. Washington, IA. 52353		100.00	<input type="checkbox"/>
SUB-TOTAL				\$ 882.00	
TOTAL (if last page of this schedule)				\$	

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Page 3 of 5
(for Schedule A)

For Instructions, See Back of Form

Reset Form

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

CONTRIBUTIONS -- MONEY TAKEN IN
(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Jack Drake For State Representative

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
10-22-08	ID# CK#	Nancy Eichelberger 208 West Depot Wayland, IA. 52654		\$ 100.00	<input type="checkbox"/>
10-22-08	ID# 6162 CK# 1456	Iowa Agribusiness Employees 900 Des Moines St. Des Moines, IA. 50309		100.00	<input type="checkbox"/>
10-23-08	ID# CK#	Mrs Gilbert Hrisinger P.O. Box 186 Griswold, IA. 51535		25.00	<input type="checkbox"/>
10-23-08	ID# CK#	Ronald Young 45724 Dogwood Rd. Catson, IA. 51525		50.00	<input type="checkbox"/>
10-23-08	ID# 6042 CK# 1394	Grocers Political Action Com. 2540 - 106th St. Ste. 102 Des Moines, IA. 50322		250.00	<input type="checkbox"/>
10-23-08	ID# CK#	Dale Breuer 7204 Jefferson Ave. Windsor Hts., IA. 50322		100.00	<input type="checkbox"/>
10-24-08	ID# 9743 CK# 141	Iowa Turkey Federation P.O. Box 825 Ames, IA. 50010		300.00	<input type="checkbox"/>
10-24-08	ID# CK#	Raleigh Woltmann 31937-430th St. Avoca, IA. 51521		25.00	<input type="checkbox"/>
10-24-08	ID# 6400 CK# 649	IA. Restaurant Association 8525 Douglas, Ste. 47 Des Moines, IA. 50322		150.00	<input type="checkbox"/>
10-25-08	ID# PAC # applied for CK# 1008	Iowa Poultry 8515- Douglass Ave STE. 9 Urbandale, IA. 50322		200.00	<input type="checkbox"/>
SUB-TOTAL				\$ 1300.00	
TOTAL (if last page of this schedule)				\$	

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Page 4 of 5
(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Jack Drake for State Representative

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
10-27-08	ID# CK#	Mark Doll 815 South branch Dr. Waukegan, IA. 50263		\$ 200.00	<input type="checkbox"/>
10-27-08	ID# CK#	Bret Richards PO Box 293 Irwin, IA. 51446		25.00	<input type="checkbox"/>
10-27-08	ID# CK#	Harley Ploeh 49272 Western Ave. Adoca, IA. 51521		100.00	<input type="checkbox"/>
10-27-08	ID# CK#	Gaty Wittjes 1504 cyclone Ave. Warren, IA. 51537		50.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

TOTAL (If last page of this schedule)

\$375.00

\$4,282.00

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Page 5 of 5
(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Jack Drake for State Representative

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10-15-08	ID# CK#1262	KJAN Radio Station North Olive St. Atlantic, IA. 50022	Campaign ads	\$1628.00
10-15-08	ID# CK#1263	KNOD Radio Station Harlan, IA. 51537	Campaign ads	900.00
10-15-08	ID# CK#1264	KSOM Radio Station 413 Chestnut St. Atlantic, IA. 50022	Campaign ads	1795.50
10-19-08	ID# CK#1265	Our Lady of Grace Church 203 Adair St. Griswold, IA. 51535	Campaign dinner	18.00
10-19-08	ID# CK#1266	Mahe Fire Dept. Main Street Mahe, IA. 51552	Campaign dinner	15.00
10-20-08	ID# CK#1267	Postmaster 4th Street Griswold, IA. 51535	roll of stamps for campaign	27.00
10-22-08	ID# CK#1268	Faith Lutheran Church 707 Adair St. Griswold, IA. 51535	Campaign dinner	14.00
10-22-08	ID# CK#1269	Republican Party of Iowa 621 E. 9th Des Moines, IA. 50309	Contribution	3000.00
SUB-TOTAL				\$7397.50
TOTAL (if last page of this schedule)				\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(f).)

Page 1 of 2

(for Schedule B)

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FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Jack Drake for State Representative

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10-23-08	ID# CK# 1270	Atlantic News Telegraph 410 Walnut St. Atlantic, IA. 50022	Campaign ads	\$587.17
10-23-08	ID# CK# 1271	Griswold American P.O. Box 687 Griswold, IA. 51535	Campaign ad	108.00
10-23-08	ID# CK# 1272	UCCW Fellowship 1607 Hazel St. Atlantic, IA. 50022	Campaign meals	12.00
10-26-08	ID# CK# 1273	St. Peter & Paul Church 1011 E. 13th St. Atlantic, IA. 50022	Campaign meals	16.00
10-26-08	ID# CK# 1274	Defiance Methodist Church Defiance, IA. 51527	Campaign meals	16.00
10-26-08	ID# CK# 1275	United Church of Christ 304 N. Elm St. Avoca, IA. 51521	Campaign meals	16.00
10-28-08	ID# CK# 1276	Jack Drake 504 Adair Street Griswold, IA. 51535	370 Miles @ .43 Campaign Car	159.10
10-28-08	ID# CK# 1277	Jack Drake 504 Adair Street Griswold, IA. 51535	369 Miles @ .43 put up signs	158.67
SUB-TOTAL				\$1072.94
TOTAL (if last page of this schedule)				\$8470.44

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(f).)

Page 2 of 2

(for Schedule B)

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FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Jack Drake for State Representative

Reset Form

SCHEDULE E (Rev. 06/97)	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YY)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
10-26-08	Iowa Farm Bureau 5400 UNIVERSITY AVE. WEST DES MOINES, IA. 50266		Expense for mailing	\$ 1177.50	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$ 1177.50	
TOTAL (if last page of this schedule)				\$ 1177.50	

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1
(for Schedule E)